

General

Title

AIDS Drug Assistance Program (ADAP): percentage of identified inappropriate antiretroviral (ARV) regimen components prescriptions that are resolved by the ADAP program during the measurement year.

Source(s)

Health Resources and Services Administration (HRSA). HAB HIV performance measures. ADAP: AIDS Drug Assistance Program. Rockville (MD): Health Resources and Services Administration (HRSA); 2009 Dec 10. 9 p.

Measure Domain

Primary Measure Domain

Population Health Quality Measures: Population Structure

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the percentage of identified inappropriate antiretroviral (ARV) regimen components prescriptions that are resolved by the AIDS Drug Assistance Program (ADAP) program during the measurement year.

Rationale

Human immunodeficiency virus (HIV)-related morbidity and mortality has dropped dramatically due to advances in HIV/acquired immune deficiency syndrome (AIDS) treatment. But reductions are uneven across HIV-infected populations due to unequal access to care and variable quality of services provided. Quality management seeks to enhance the quality of HIV care provided and increase access to services. They do so by measuring how health and social services meet established professional standards and user expectations.

The U.S. Public Health Service (PHS) Guidelines for the Use of Antiretroviral Agents in HIV-1-Infected Adults and Adolescents and the Guidelines for the Use of Antiretroviral Agents in Pediatric HIV Infection specify antiretroviral regimens or components are not generally recommended because of suboptimal antiviral potency, unacceptable toxicities, or pharmacologic concerns (Panel on Antiretroviral Guidelines for Adults and Adolescents, 2009; Working Group on Antiretroviral Therapy and Medical Management of HIV-Infected Children, 2009). AIDS Drug Assistance Program (ADAP) programs are included as core medical services funded by the Ryan White HIV/AIDS Program, and are therefore, required to provide care and treatment consistent with PHS guidelines.

PHS Guidelines

Adult and Adolescents Patients: Antiretroviral Regimens or Components That Should Not Be Offered At Any Time (Panel on Antiretroviral Guidelines for Adults and Adolescents, 2009)

Components not recommended	Exceptions
Atazanavir + indinavir	No exception
Didanosine + stavudine	When no other antiretroviral options are available and potential benefits outweigh the risks
2-non-nucleoside reverse-transcriptase inhibitor (NNRTI) combination	No exception
Efavirenz in first trimester of pregnancy or in women with significant child-bearing potential	When no other antiretroviral options are available and potential benefits outweigh the risks
Emtricitabine + lamivudine	No exception
Etravirine + Unboosted protease inhibitor (PI)	No exception
Etravirine + ritonavir-boosted atazanavir or fosamprenavir	No exception
Etravirine + ritonavir-boosted tipranavir	No exception
Nevirapine in treament-naïve women with CD4 greater than 250 or men with CD4 greater than 400	If no other antiretroviral option available; if used patients should be closely monitored
Stavudine + zidovudine	No exception
Unboosted darunavir, saquinavir, or tipranavir	No exception

Pediatric Patients: Antiretroviral Components Not Recommended as Part of an Antiretroviral Regimen (Working Group on Antiretroviral Therapy and Medical Management of HIV-Infected Children, 2009)

Components not recommended	Exceptions
Atazanavir + indinavir	No exception
Dual nucleoside reverse transcriptase inhibitor (NRTI) combinations: Lamivudine + Emtricitabine Stavudine + Zidovudine Stavudine + Didanosine	No exception No exception May be considered for use in antiretroviral-eperienced children who require therapy change
Efavirenz in first trimester of pregnancy or sexually active adolescent girls of childbearing potential	When no other antiretroviral options are available and potential benefits

Components not recommended	outweigh r iskseptions
Nevirapine initiation in adolescent girls with CD4 greater than 250 cells/mm or adolescent boys with CD4 greater than 400 cells/mm3	Only if benefit clearly outweighs the risk
Unboosted saquinavir	No exceptions

Evidence for Rationale

Health Resources and Services Administration (HRSA). Deliver HIV/AIDS care: quality of care. [internet]. Rockville (MD): Health Resources and Services Administration (HRSA); [accessed 2016 Jun 23].

Health Resources and Services Administration (HRSA). HAB HIV performance measures. ADAP: AIDS Drug Assistance Program. Rockville (MD): Health Resources and Services Administration (HRSA); 2009 Dec 10. 9 p.

Panel on Antiretroviral Guidelines for Adults and Adolescents. Guidelines for the use of antiretroviral agents in HIV-1-infected adults and adolescents. Bethesda (MD): Department of Health and Human Services (DHHS); 2009 Dec 1. 161 p.

Working Group on Antiretroviral Therapy and Medical Management of HIV-Infected Children. Guidelines for the use of antiretroviral agents in pediatric HIV infection. Bethesda (MD): Department of Health and Human Services (DHHS); 2009 Feb 23. various p.

Primary Health Components

Human immunodeficiency virus (HIV); AIDS Drug Assistance Program (ADAP); antiretroviral regimens

Denominator Description

Number of inappropriate antiretroviral (ARV) regimen components prescriptions included in the U.S. Public Health Service guidelines, Antiretroviral Regimens or Components That Should Not Be Offered At Any Time and Antiretroviral Regimens or Components That Should Not Be Offered for Treatment of Human Immunodeficiency Virus (HIV) Infection in Children that are identified by the AIDS Drug Assistance Program (ADAP) (see the related "Denominator Inclusions/Exclusions" field)

Numerator Description

Number of antiretroviral (ARV) regimen components prescriptions included in the U.S. Public Health Service guidelines, *Antiretroviral Regimens or Components That Should Not Be Offered At Any Time* and *Antiretroviral Regimens or Components That Should Not Be Offered for Treatment of Human Immunodeficiency Virus (HIV) Infection in Children* that are resolved by the AIDS Drug Assistance Program (ADAP) program during the measurement year

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

Additional Information Supporting Need for the Measure
Unspecified
Extent of Measure Testing
Unspecified
State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

State/Provincial Public Health Programs

Professionals Involved in Delivery of Health Services not defined yet

Least Aggregated Level of Services Delivery Addressed

State/Provincial

Statement of Acceptable Minimum Sample Size

Does not apply to this measure

Target Population Age

Does not apply to this measure

Target Population Gender

Does not apply to this measure

National Framework for Public Health Quality

Public Health Aims for Quality

Effective

Population-centered

Proactive

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Healthy People/Healthy Communities

National Quality Strategy Priority

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Not within an IOM Care Need

IOM Domain

Not within an IOM Domain

Data Collection for the Measure

Case Finding Period

The measurement year

Denominator Sampling Frame

Clinical information

Denominator (Index) Event or Characteristic

Does not apply to this measure

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

Number of inappropriate antiretroviral (ARV) regimen components prescriptions included in the U.S. Public Health Service guidelines, Antiretroviral Regimens or Components That Should Not Be Offered At Any Time and Antiretroviral Regimens or Components That Should Not Be Offered for Treatment of Human Immunodeficiency Virus (HIV) Infection in Children that are identified by the AIDS Drug Assistance Program (ADAP)

Note: Refer to the original measure documentation for additional data elements.

Exclusions

For ADAP clients with multiple sources of funding for their medications, the ADAP program is responsible for identifying only ARV regimen components funded by ADAP.

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

Number of antiretroviral (ARV) regimen components prescriptions included in the U.S. Public Health Service guidelines, *Antiretroviral Regimens or Components That Should Not Be Offered At Any Time* and *Antiretroviral Regimens or Components That Should Not Be Offered for Treatment of Human Immunodeficiency Virus (HIV) Infection in Children* that are resolved by the AIDS Drug Assistance Program (ADAP) program during the measurement year

Exclusions

Unspecified

Numerator Search Strategy

Fixed time period or point in time

Data Source

National public health data

State/Province public health data

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

Unspecified

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Rate/Proportion

Interpretation of Score

Desired value is a higher score

Allowance for Patient or Population Factors

not defined yet

Standard of Comparison

not defined yet

Identifying Information

Original Title

ADAP: inappropriate antiretroviral regimen components resolved by ADAP.

Measure Collection Name

HIV/AIDS Bureau (HAB) Performance Measures

Measure Set Name

AIDS Drug Assistance Program

Submitter

Health Resources and Services Administration - Federal Government Agency [U.S.]

Developer

Health Resources and Services Administration - Federal Government Agency [U.S.]

Funding Source(s)

Unspecified

Composition of the Group that Developed the Measure Unspecified Financial Disclosures/Other Potential Conflicts of Interest Unspecified Adaptation This measure was not adapted from another source. Date of Most Current Version in NQMC 2009 Dec Measure Maintenance Unspecified Date of Next Anticipated Revision Unspecified Measure Status This is the current release of the measure.

Measure Availability

Source available from the Health Resources and Services Administration (HRSA) Web site

For more information, contact the HRSA HIV/AIDS Bureau (HAB) at 5600 Fishers Lane, Rockville, MD 20857; E-mail: HIVmeasures@hrsa.gov; Web site: www.hrsa.gov/index.html

NQMC Status

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Production

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